

Work Order ID 85515

85515

Page 1

June-08-12 2:47:31 PM

Item ID: D3189-1

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Item Name: Chafing Shield

Stop ***NS2***

Start Date: 08/06/2012 Start Qty: 12.00

12

Cust Item ID:

Required Date: 22/06/2012 Req'd Qty: 12.00

12

Customer:

Reference:

Approvals: Process Plan: MLJ Date: 12/06/08

Tooling:

Date:

Run Start ***NR1***

QC: Date: SPC (Y/N):

Date:

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
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D3189	Rev B
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100		0.00
-----	--	------

100

SHEAR

Waterjet

Memo

0.00

FLOW CNC Waterjet

304.030

1-Cut as per Dwg

Dwg Rev: B

Prog Rev: B

2-Deburr if necessary

103

QC2- Inspect parts off machine FAI/FAIB

0.00

103

QC

Memo

0.00

Quality Control

13 0 JM 12-6-15

13 0 JM 12-6-15

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Run Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

105

QC8- Inspect parts - second check

0.00

105

QC

Memo

0.00

Quality Control

110

Small Fab

0.00

110

Small Fab

Memo

0.00

Small Fab

1- Roll as per Dwg D3189

2- Apply a thin layer of Pro Seal on inside surface of chafing shield 0.03" - 0.06" thick as per DS19549 and DEO D412-664-243. **121287**

13

FF
12-06-20

AB 12-6-30 (13)

120

QC5- Inspect part completeness to step on W/O

0.00

120

QC

Memo

0.00

Quality Control

13

12-07-03

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION <div style="display: flex; justify-content: space-between;"> <div> Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> </div> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> Other <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> </div>									
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector				
Doc/Data													
Equip/Tooling													
Operator													
Material													
Offset/Setup													
Other													
Process													
Supplier													
Training													
Unauthorized													
FAULT CATEGORY													
Landing Gear <input type="checkbox"/> Bending Passes Below Min <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimp at Bending <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Other <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Ripples on Inner Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			Hardware <input type="checkbox"/> Breaking <input type="checkbox"/> Missing <input type="checkbox"/> Size/Length <input type="checkbox"/> Spinning <input type="checkbox"/> Threading <input type="checkbox"/> Wrong Drill Holes <input type="checkbox"/> Misaligned <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Undersized <input type="checkbox"/> Too Many			General <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Documentation/Data <input type="checkbox"/> Finish <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Inspection Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Jigs/Fixtures/Tooling <input type="checkbox"/> Kit Incorrect <input type="checkbox"/> Kit Missing			<input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Off-Set <input type="checkbox"/> Orientation Misread <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Lost <input type="checkbox"/> Part Moved <input type="checkbox"/> Raw Material			<input type="checkbox"/> Set-up <input type="checkbox"/> Supplier <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other _____ _____ _____	

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Page 3

June-08-12 2:47:31 PM

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Item Name: Chafing Shield

Start Date: 08/06/2012 Start Qty: 12.00 ***12***

Cust Item ID:

Required Date: 22/06/2012 Req'd Qty: 12.00 ***12***

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	Identify as per dwg & Stock Location: L653	0.00							
130									
Packaging	Memo	0.00							
Packaging									
140	QC21- Final Inspection - Work Order Release	0.00							
140									
QC	Memo	0.00							
Quality Control									

AS

12-7-16

12/7/17

ML5 12/07/16

Picklist Print

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Page 1

Work Order ID: 85515

85515

Parent Item: D3189-1

D3189-1

Parent Item Name: Chafing Shield

Start Date: 08/06/2012

Required Date: 22/06/2012

Start Qty: 12.00

Required Qty: 12.00

Comments:

IPP B05.08.22No longer made in-houseKJ/JLM

IPP Rev:C 06-03-24 Rolling Now made in House JLM

IPP Rev:D 07-04-16 As per Rev B JLM

IPP Rev:E

11.05.11 now made on waterjet DD verf:JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
---------------------------------	------------------------	---------------	-------------	---------------------	------------------	-----------------	--------------------	----------------	-------------	--------------	---------------	----------------	--------

M304S25GA

Purchased

No

100

sf

68.7000

0.32

4.042105

**

M304S25GA

304/316 .020" Sheet

Jm 12-6-15

Location

Loc Qty

Loc Code

MAT020

68.7

118228

68.7

118228

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

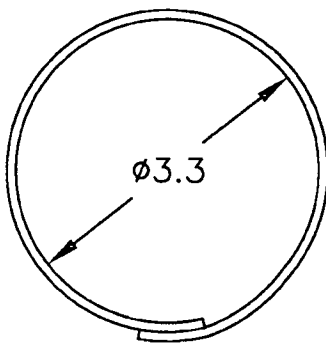
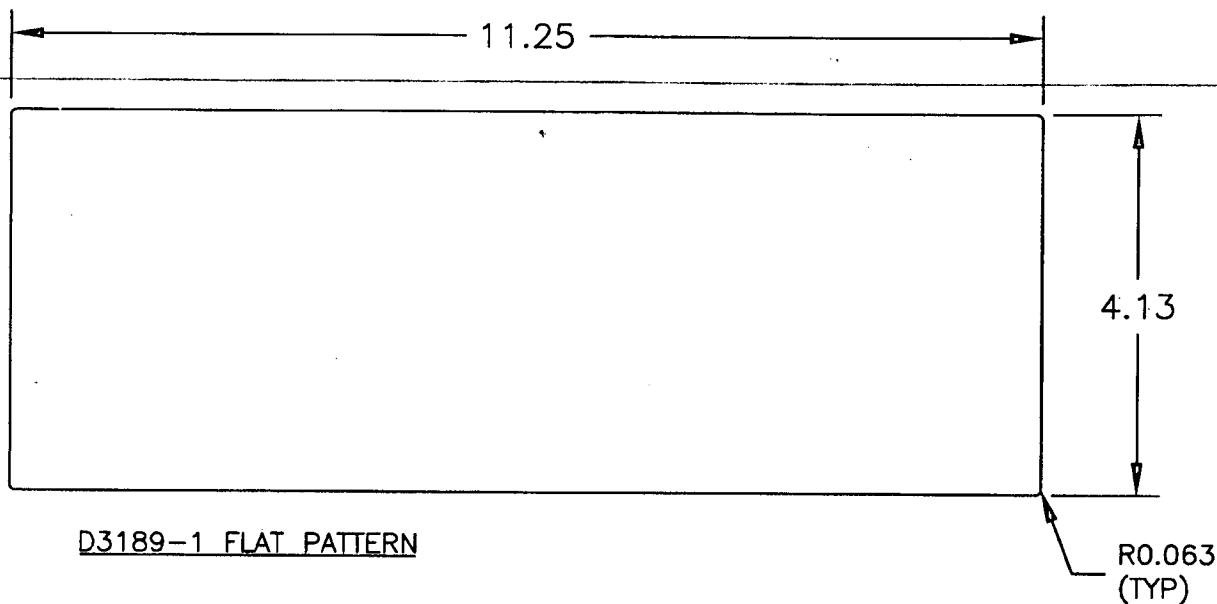
Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width:15%;">Skid-tube <input type="checkbox"/></td> <td style="width:15%;">Crosstube <input type="checkbox"/></td> <td style="width:15%;">Prod. Eng. Coord. <input type="checkbox"/></td> <td style="width:15%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Supplier <input type="checkbox"/>		Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Other <input type="checkbox"/>	
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CHECKED <i>[Signature]</i>	APPROVED <i>[Signature]</i>	DRAWING NO. D3189	REV. B SHEET 1 OF 2
DATE 07.01.05		TITLE CHAFING SHIELD	SCALE 1:2
A	03.05.08	NEW ISSUE	
B	07.01.05	ADD -3	

RELEASED

07.03.27 *[Signature]*



D3189-1 ROLLING DETAIL
NOT TO SCALE

D3189-1 CHAFING SHIELD

- 1) MATERIAL: AISI 304/316 SS 0.020" THICK (REF. DART SPEC M304S25GA)
- 2) FINISH: NONE
- 3) DEBURR/BREAK ALL SHARP EDGES 0.005 TO 0.010
- 4) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
- 5) ALL DIMENSIONS ARE IN INCHES

SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
NO. *85515* *ML* *12/06/08*

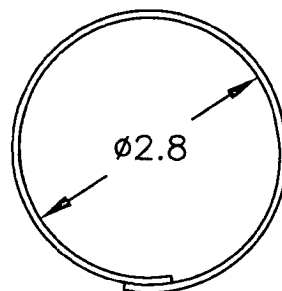
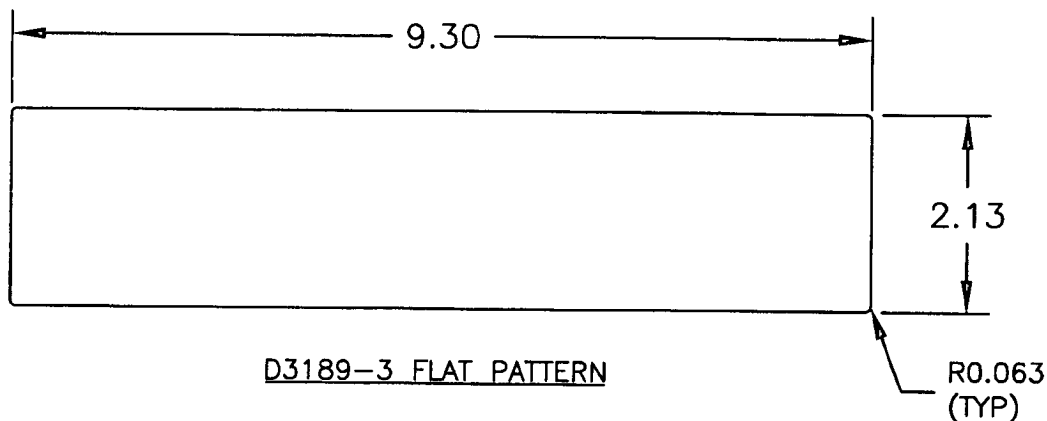
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CHECKED <i>[Signature]</i>	APPROVED <i>[Signature]</i>	DRAWING NO. D3189	REV. B SHEET 2 OF 2
DATE 07.01.05		TITLE CHAFING SHIELD	SCALE 1:2

RELEASED
07.03.27 *[Signature]*



D3189-3 ROLLING DETAIL
NOT TO SCALE

D3189-3 CHAFING SHIELD

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0507

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